

Department of Environmental Quality  
Office of Environmental Compliance  
Surveillance Division  
P.O. Box 4312  
Baton Rouge, LA 70821-4312  
Phone: (225) 219-3600  
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**LOUISIANA**  
**Form for Notification of Change to Stage 1/Stage 2**  
**Vapor Recovery at Individual Facilities**



**Instructions:** Use this form to update any information provided on the Stage 1/Stage 2 Vapor Recovery Application that has changed.  
Type or print carefully in ink (Illegible forms will be returned).  
Mail or fax the completed form to the Stage 1/Stage 2 Program at the address above.

**Applicant Information**

Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**Gasoline Dispensing Facility Information**

Agency Interest No. \_\_\_\_\_ Facility ID No. \_\_\_\_\_

Full Legal Business Name \_\_\_\_\_

Facility Location \_\_\_\_\_

Contact Person \_\_\_\_\_ Telephone No. \_\_\_\_\_

Federal Tax ID # \_\_\_\_\_ Facility's Local Name \_\_\_\_\_

The information supplied on this form is true and correct to the best of my knowledge.

\_\_\_\_\_  
Signature of Authorized Officer

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Title